

Welcome to the summer edition of the AMA's *Very Influential Physician (VIP) Insider*. Read on for details about these topics:

- As Congress eyes the August recess there is still much work to be done
- AMPAC Campaign School returns in-person this fall
- Pulling at threads that may unravel the election narrative
- Advocacy odds and ends

As Congress eyes the August recess there is still much work to be done

Members of Congress will soon be heading home for their August district work period where they will be meeting with—and listening to—their constituents. There isn't a better opportunity for you to turn up the heat by reminding them that there is still unfinished work on important health care issues, including looming cuts to physician Medicare payments and fixing the cumbersome prior authorization process.

Tell Congress to get our health care system back on track by clicking the issue links below!

Physician Medicare payment cuts

Late last year, physician advocates from across the country united to successfully persuade Congress to delay a "perfect storm" of Medicare payment cuts that, if enacted, would have severely impeded patient access to care.

Unfortunately, if Congress does not act by the end of the year, these delayed cuts, and some new ones, will take effect in 2023 and cause serious disruption to physician practices.

It's clear that Congress must work with the physician community to develop long-term solutions to the systemic problems with the Medicare physician payment system and preserve patient access by passing legislation. In the meantime, policymakers need to address the immediate problem.

Before the end of the year, we are asking Congress to:

- Extend the Congressionally enacted 3 percent temporary increase in the Medicare physician fee schedule
- Provide relief for an additional 1.5 percent budget neutrality cut that is planned for 2023
- End the statutory annual freeze and provide an inflation-based update for the coming year

• Waive the 4 percent PAYGO sequester necessitated by passage of legislation unrelated to Medicare

Prior Authorization

Physicians complete an average of 41 prior authorizations per week. This unnecessary burden amounts to roughly 13 hours weekly that physicians and their staff must spend on administrative work instead of seeing and treating patients. If an insurance plan covers a treatment that would benefit a patient, physicians should not have to waste time ensuring access to it.

Further complicating matters, the criteria used for prior authorizations are unclear. Physicians rarely know at the point-of-care if the prescribed treatment requires prior authorization, only to find out later when a patient's access is delayed or denied. This ineffective system can cause unnecessary tension in the physician-patient relationship and negatively impact patient health.

Luckily Congress has already taken steps to address this by introducing the Improving Seniors' Timely Access to Care Act (H.R. 8487) which would require Medicare Advantage plans to adopt transparent PA programs that adhere to evidence-based medical guidelines and hold plans accountable for making timely PA determinations and providing rationales for denials.

Momentum is building on H.R. 8487 and, with enough grassroots pressure in August, we can get it across the finish line when Congress returns in the fall.

With only a handful of legislative days left this year, please join us in the fight to get our health care system back on track. Take action on these critical issues and look for opportunities to get in front of your members of Congress and their staff over the August recess. Visit physiciansgrassrootsnetwork.org for updated resources including policy points and information on public events that lawmakers are planning. Also, please keep us informed on your activities throughout the month by filling out this <u>brief form</u>.

Remember, elections are approaching, and time is running out for this Congress to take the critical steps required to help physicians and the patients they care for. Please do your part by answering this urgent call to action!

AMPAC Campaign School returns in-person this fall

After two years of virtual programming due to the COVID-19 pandemic, AMPAC is excited to announce that the 2022 Campaign School will be returning in-person September 29 – October 2 at the AMA offices in Washington, DC.

Running an effective campaign can be the difference between winning and losing a race. That's why the Campaign School is designed to give you the skills and strategic approach you will need out on the campaign trail. Our team of political experts will teach you everything you need to know to run a successful campaign. Under the direction of our lead trainers, participants will be broken into campaign staff teams to run a simulated congressional campaign using what they've learned during group sessions on strategy, vote targeting, social media, advertising and more.

Attendees include physicians, spouses of physicians, residents and medical students and state medical society staff interested in becoming more involved in politics. Participants range from those attracted to grassroots efforts to those considering becoming a candidate for public office. No matter where you are in the process, you will develop a new understanding of how campaigns are run. As a graduate of the AMPAC program, candidates will rely on you to give them advice on strategy, message, and campaign plans.

Please note the following:

- Registration fee is \$350 for AMA Member/\$1000 for non-AMA members. This fee is waived for AMA residents and students; however, space is limited and the AMPAC Board will review and select four participants from the pool of qualified resident and student applicants.
- Faculty, materials, and all meals during the meeting are covered by the AMA. Participants are responsible for their registration fee, travel to/from Washington, DC and hotel accommodations (AMA will provide you with a list of nearby hotels within walking distance of the AMA offices).
- All participants will be required to provide proof of full vaccination and at least one booster for the COVID-19 virus.

<u>Registration for the 2022 Campaign School is now OPEN</u>. Space is limited and the deadline to register is September 4 (or sooner if maximum capacity is reached).

For more information contact us at: politicaleducation@ama-assn.org

Pulling at threads that may unravel the election narrative

By Charlie Cook of the National Journal

On paper, the November midterm elections should be a disaster of epic proportions for Democrats. Midterms are bad enough for any party holding the White House. When a party controls both chambers in Congress, it can be particularly treacherous. There's no effective way to point a finger or shift the blame.

The power of that trend, and Democrats' experience with it over the last 50 years, comes through loud and clear on page 5 of GOP consultant <u>Bruce Mehlman's latest slide deck</u>. Mehlman's presentation shows that the last three times that Democrats went into an election holding a federal trifecta, the outcome wasn't pretty. In 1980, when President Carter was seeking reelection and Democrats had it all, they lost both the presidency and the Senate (which they had won in every election since 1954). In 1994, Democrats lost two legs as well, both the Senate and House, the latter for the first time in 40 years. In 2010, Democrats lost their House majority. Their Senate majority fell four years later in President Obama's second-term midterm.

This year, considering President Biden's historically low job-approval ratings, 40-year-high inflation rates, and the widespread expectation of a recession in the next 12-18 months, it should add up to an unspeakable challenge for any similarly situated party.

But is disaster for Democrats inevitable? In the House it is hard to come to any different conclusion. In the Senate, however, a few exposed threads are dangling that could unravel such an outcome. One nagging loose end is that given these dire circumstances for Democrats, shouldn't Republicans have a wider lead than just 1 to 3 points in the public preference for Congress? The GOP advantage in the *FiveThirtyEight* average of generic congressional ballot test polls is just 1.1 percentage points. *RealClearPolitics* gives them a 2.5-point average lead.

Clearly, voters are not happy with Biden and Democrats. But are there other things at work? Former President Trump's brand has been under a lot of pressure from the Jan. 6 hearings, and signs of Trump fatigue abound. An announcement of a presidential campaign before the midterm election has the potential to highlight, bold, and underscore any reservations the public may have about him and distract from a focus on Biden as well as the <u>state of the national economy</u>.

Similarly, or maybe inferentially, the Republican Party's brand has taken a bit of a beating in recent months. A very aggressive cultural agenda pursued by Republican officials in many states seems a bit discordant with where the electorate is on those issues.

Another potential loose end is Republican primaries have nominated more than a few relatively exotic candidates, who will really test the proposition that our elections are getting more and more parliamentary. History has shown that a candidate's brand can become so toxic that even with hurricane-force tailwinds, they still cannot get across the finish line first.

In Georgia, newly minted Sen. Raphael Warnock is seeking a full term in what is, on paper anyway, the toughest state for any Democratic Senate incumbent. But Herschel Walker has proven to be one of the more underwhelming Senate candidates in modern history. He brings more baggage than Samsonite to a race that Republicans should—but may well not—win.

At least in my mind, Pennsylvania Democratic Senate nominee John Fetterman is nowhere near as able and impressive as Warnock. He may or may not play well in the suburbs of Philadelphia and Pittsburgh. But again, Republican nominee Mehmet Oz could run a competing luggage store in the same mall as Walker. The brutal web ad produced by *MeidasTouch.com* gives a sampling of the opposition-research opportunities afforded by the Harvard- and University of Pennsylvania-educated Oz.

Obama's election to the presidency in 2008 and subsequent ambitious agenda evoked an incendiary response that effectively created the tea-party movement. It was a double-edged sword. On the one hand, the GOP benefitted from skyrocketing voter enthusiasm. On the other, the movement elevated not-ready-for-prime-time candidates in Colorado, Delaware, and Nevada in 2010, and again in Indiana and Missouri in 2012. Those races effectively delayed Republicans' takeover of the Senate until 2014. Similarly, Biden and the Democratic agenda of 2021, while hurting the party in so many ways, may have unleashed an exuberance of certain extreme elements of the GOP, which is nominating candidates who may not be able to win under otherwise optimal conditions.

In all likelihood, this will still be an awful election for Democrats. But keep in mind that while the record of midterm-election outcomes in the House is horrific for the party holding the White House (losses in 36 out of 39 since the Civil War), the Senate record is more mixed (losses in 19 out of the 26 midterms since senators began to be directly elected).

Democrats are rooting hard that this year is another one of those exceptions.

Advocacy odds and ends

The Congressional August recess is almost here. For the next six weeks members of Congress and Senators will be back in their districts which provides a perfect opportunity for you, as constituents, to interact with them and let them know what issues are important to you! Below is a snapshot of the August Congressional calendar to help you plan your in-district interactions.

AUGUST

SUN	MON	TUE	WED	THU	FRI	SAT
	1.	2.	3	4	5	6
7	8	9.	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	· · · ·		

Be sure to follow all the AMA's physician grassroots network social media accounts for all the latest news on physician advocacy and what you can do to make sure your voice is heard on

District Work Periods

State Work Periods

Capitol Hill.

on

Both Work Periods



